

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		<i>10/20/89</i>
O.I.P.E. CLASSIFIER		8	<i>10-21-99</i>
FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	2-21-01
2	✓	✓	2-21-01
3	✓	✓	2-21-01
4	✓	✓	2-21-01
5	✓	✓	2-21-01
6	✓	✓	2-21-01
7	✓	✓	2-21-01
8	✓	✓	2-21-01
9	✓	✓	2-21-01
10	✓	✓	2-21-01
11	✓	✓	2-21-01
12	✓	✓	2-21-01
13	✓	✓	2-21-01
14	✓	✓	2-21-01
15	✓	✓	2-21-01
16	✓	✓	2-21-01
17	✓	✓	2-21-01
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25	✓	✓	2-21-01
26	✓	✓	2-21-01
27	✓	✓	2-21-01
28	✓	✓	2-21-01
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30	✓	✓	2-21-01
31	✓	✓	2-21-01
32	✓	✓	2-21-01
33	✓	✓	2-21-01
34	✓	✓	2-21-01
35	✓	✓	2-21-01
36	✓	✓	2-21-01
37	✓	✓	2-21-01
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39	✓	✓	2-21-01
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42	✓	✓	2-21-01
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47	✓	✓	2-21-01
48	✓	✓	2-21-01
49	✓	✓	2-21-01
50	✓	✓	2-21-01

Claim	Final	Original	Date
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions
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